

ISSUE CLASSIFICATION	
Class	Subclass

PATENT NUMBER

MS SCANNED	O.I.P.E. GHT	PATENT DATE
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APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
09/509945	D F	435		1649	

APPLICANTS

TITLE

PTO-2040
12/99[illegible]

<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
___ The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
___ The term of this patent shall not extend beyond the expiration date of U.S. Patent No. _____ _____ _____	_____ (Primary Examiner) (Date)			ISSUE FEE	
				Amount Due	Date Paid
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